

**YALE DEPARTMENT OF ASTRONOMY  
TRAVEL EXPENSE AND REIMBURSEMENT FORM**

|                         |            |      |
|-------------------------|------------|------|
| Name of Traveler: _____ | Soc. Sec # | Date |
| Address: _____          |            |      |
| _____                   |            |      |

Purpose & Dates of Travel: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

|                       |  |                              |
|-----------------------|--|------------------------------|
| Account to be Charged | Travel Advance<br>Yes ___ No ___<br>If yes,<br>Amount \$ | Rental Car<br>Yes ___ No ___ |
|-----------------------|--|------------------------------|

|  |                      |                   |
|--|----------------------|-------------------|
| Expenses (Attached <i>Original</i> Receipts) | Departure Date _____ | Return Date _____ |
|--|----------------------|-------------------|

|   | Traveler Expenses |  |
|---|-------------------|--|
| Air/Bus/Rail (Attach receipt even if prepaid) _____             | \$ _____          |  |
| Hotel/Lodging (Attach receipt) _____ nights @ _____ night _____ | \$ _____          |  |
| Meal Allowance - _____ days _____                               | \$ _____          |  |
| Rental Car (Attach receipt) _____ days @ \$ _____ per day _____ | \$ _____          |  |
| Parking /Tolls (Attach receipt) _____                           | \$ _____          |  |
| Private Automobile _____ miles x 40.5 cents _____               | \$ _____          |  |
| Taxi/Limo (Attach receipt) _____                                | \$ _____          |  |
| Other/Specify (Attach receipt) _____                            | \$ _____          |  |
| Other/Specify (Attach Receipt) _____                            | \$ _____          |  |
| <b>TOTALS</b>   | \$ _____          |  |

Total Expenses \$ \_\_\_\_\_

Less Advance \$ \_\_\_\_\_

Balance Due Traveler \$ \_\_\_\_\_

Or

Refund Due Yale \$ \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_